Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	1624
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	PROCESS FOR PRODUCING ARSENIC TRIOXIDE FORMULATIONS AND METHODS FOR TREATING CANCER USING ARSENIC TRIOXIDE OR MELARSOPROL
Attorney Docket Number::	CELLTH 3.0-003 CONT CONT XII
Request for Early Publication?::	No
Request for Non-Publication?::	No
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Raymond
Middle Name::	P.
Family Name::	Warrell
Name Suffix::	Jr.
City of Residence::	Westfield
State or Province of Residence::	NJ
Country of Residence::	US

Street of mailing address::	6 Kimball Circle
City of mailing address::	Westfield
State or Province of mailing address::	NJ
Postal or Zip Code of mailing address::	07090

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Italy
Status::	Full Capacity
Given Name::	Pier
Middle Name::	Paolo
Family Name::	Pandolfi
City of Residence::	New York
State or Province of Residence::	NY
Country of Residence::	US
Street of mailing address::	303 East 60th Street
City of mailing address::	New York
State or Province of mailing address::	NY
Postal or Zip Code of mailing address::	10022

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Janice
Middle Name::	L.
Family Name::	Gabrilove
City of Residence::	New York
State or Province of Residence::	NY
Country of Residence::	US
Street of mailing address::	25 East 86th Street
City of mailing address::	New York
State or Province of mailing address::	NY
Postal or Zip Code of mailing address::	10028

Corresp ndence Informati n

Correspondence Customer Number:: 000530

Representative Information

Representative Customer Number:: 000530

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	10/425,785	04/30/03
10/425,785	Continuation of	09/189,965	11/10/98
09/189,965	An application claiming the benefit under 35 USC 119(e)	60/064,655	11/10/97

Assignee Information

Assignee name::	Memorial Sloan-Kettering Cancer Center
Street of mailing address::	1275 York Avenue
City of mailing address::	New York
State or Province of mailing address::	NY
Postal or Zip Code of mailing address::	10021